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23446

7590

07/14/2009

MCANDREWS HELD & MALLOY, LTD
 500 WEST MADISON STREET
 SUITE 3400
 CHICAGO, IL 60661

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Michael T. Cruz	via EFS-Web	(Depositor's name)
/Michael T. Cruz/		(Signature)
July 28, 2009		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/660,780

09/12/2003

Nambi Seshadri

20220US02

5880

TITLE OF INVENTION: CORRELATING VIDEO IMAGES OF LIP MOVEMENTS WITH AUDIO SIGNALS TO IMPROVE SPEECH RECOGNITION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/14/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
LERNER, MARTIN	2626	704-231000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 McAndrews, Held & Malloy, Ltd.

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 1.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Broadcom Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Irvine, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies _____

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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-0017 ~~and enclose an extra copy of this form~~.

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Michael T. Cruz/

Date July 28, 2009

Typed or printed name Michael T. Cruz

Registration No. 44,636

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